Ethics and Maternity Care: From Principles to Practice

Judith A. Lothian, PhD, RN, LCCE, FACCE
Associate Editor

ABSTRACT

In this column, the associate editor of *The Journal of Perinatal Education* (JPE) discusses the decision to devote an issue of JPE to the ethics of childbirth and maternity care. The current crisis in maternity care mandates a careful look at the ethical principles that provide the foundation for practice. The contents of this special issue include: a broad overview of ethics of childbearing, historical perspectives and contemporary understanding of informed decision making, the ethical issues faced by childbirth educators, and the challenges and moral distress experienced by childbirth educators and other maternity care providers when their values, beliefs, and ethical standards are in conflict with standard maternity care practices.

Journal of Perinatal Education, 18(1), 1–3, doi: 10.1624/105812409X396165

Keywords: ethics, principles, moral code, childbirth, childbirth education, maternity care, maternity care practices, moral distress, ethical distress

The current crisis in maternity care (an escalating cesarean rate, an increase in maternal morbidity and mortality, increases in preterm and near preterm births, and standard care that is “intervention-intensive”) mandates a careful look at the ethical and moral principles that are (or should be) the foundation of contemporary maternity care (Sakala & Corry, 2008). The crisis pushes us to examine the extent to which these principles are honored and the ethical dilemmas faced by childbirth educators, nurses, and other providers when standard maternity care does not reflect the ethical standards outlined in the respective codes of ethics of childbirth educators, nurses, midwives, and physicians.

The values, principles, and ethical responsibilities defined in the *Code of Ethics for Lamaze Certified*

Childbirth Educators (Lamaze International, 2006) include these central values:

- The childbirth educator’s primary responsibility is to promote the well-being of the childbearing woman.
- The childbirth educator should respect and promote the right of childbearing women to make informed decisions and assists childbearing women in their efforts to identify and clarify their goals. In addition, childbirth educators should provide full, accurate, up-to-date information upon which childbearing women are able to make an informed decision, whether it be informed consent or informed refusal.

The values, principles, and ethical responsibilities to women, our employers, and the profession

We invite readers to respond to the contents of this issue or share comments on other topics related to promoting normal birth. Responses will be published as a letter to the editor. Please send comments to Wendy Budin, Editor-in-Chief (wendy.budin@nyu.edu).

and society provide a roadmap for us, clarifying who and what we are, for ourselves, and for those who employ us. In establishing our professional standards of practice, the Lamaze code of ethics becomes a valuable support for us in our work. Our ethical standards become a guide to finding our way and staying the course despite problems (Lothian, 2007).

Unfortunately, in the real world—that is, the current maternity care environment—it is difficult to practice what we preach. It is a challenge to present the “best evidence” when hospitals provide care that is decidedly not evidence-based. Childbirth educators and nurses too often feel pressured to encourage women to comply with hospital policies and routines or are pressured to withhold information or present information in ways that do not challenge women’s prior thinking. Our mandate to assist women in making informed decisions, including making them aware of their right to informed refusal, creates never-ending dilemmas for many childbirth educators (as well as many nurses, midwives, and physicians). It is extremely difficult to move from principles to practice!

These concerns prompted our decision to dedicate a special issue of JPE to the ethics related to childbirth and maternity care. In this issue, our authors tackle the issues, pushing us to think deeply about what we believe, and how to practice based on our principles.

IN THIS ISSUE

This issue’s “Celebrate Birth!” column features Maria Brooks’ article, “Birth Muse,” which focuses our attention, once again, on the wisdom that women possess regarding childbirth and reminds us that we can trust the normal, natural process of birth. Brooks is a childbirth educator, doula, and mother of two young children. She shares with us her unexpected experience of catching the baby of her doula client, and what she learned about herself and birth from that experience.

Jennifer Torres and Raymond De Vries discuss current ethical issues associated with childbirth in the United States in their article, “Birthing Ethics: What Mothers, Families, Childbirth Educators, Nurses, and Physicians Should Know About the Ethics of Childbirth.” They provide an in-depth review of moral problems and ethical choices made by parents and health-care professionals during the prenatal, intrapartum, and postpartum periods, including prenatal testing, informed consent in labor,

birth plans, breastfeeding, and male circumcision. As sociologists, Torres and De Vries give attention to everyday ethics and the social, economic, and political context within which ethical problems exist. They challenge our current ways of thinking about choice and autonomy.

Christine Morton shares more findings of her ethnographic study of childbirth education in “A Fine Line: Ethical Issues Facing Childbirth Educators Negotiating Evidence, Beliefs, and Experience.” In a previous article published in JPE, Morton and Hsu (2007) provided an overview of the dilemmas facing childbirth educators. Educators told Morton and Hsu that their goal is to provide class participants with “unbiased information so that women could choose what is best for them” (p. 32). In this issue’s article, Morton shares her further analysis of this dilemma and discusses some ethical considerations in educators’ practices. She provides an insightful discussion of how childbirth educators present choice that leaves us with the question, “Does giving ‘unbiased’ information really help women make informed decisions?”

Holly Goldberg’s “Informed Decision Making in Maternity Care” provides historical perspectives on informed decision making, highlighting the gradual and far-from-complete move from “doing what the doctor tells you to do” to making truly informed decisions. Despite U.S. federal acts and regulations, as well as professional guidelines that dictate that every pregnant woman has the right to base her maternity care decisions on accurate, up-to-date, comprehensible information, there is a breakdown of informed consent in U.S. maternity care. Goldberg discusses the Coalition for Improving Maternity Services’ investigation of the breakdown of informed consent in maternity care and the ongoing efforts to create change in this arena.

In “Ethics and Childbirth Educators: Do Your Values Cause You Ethical Distress?” Michele Ondeck provides a summary of the history of ethics and medical ethics that inform a value oriented decision-making process in childbirth education. She explores the role of evidence in ethics from the childbirth educator’s viewpoint and uses scenarios to reflect on situations that are examples of ethical distress. In her scenarios, Ondeck uses the *Code of Ethics for Lamaze Certified Childbirth Educators* to make practice decisions that assure quality and ethical practice. She concludes that the practice of ethics and ethical decision making requires regular reflection.

Marilyn Curl, a nurse-midwife and childbirth educator, shares her insights on moral distress in “Chronic Moral Distress Among Childbirth Educators: Is There a Cure?” Curl suggests that childbirth educators who express frustration with the perceived lack of power in their practice may be suffering from moral distress. Curl explores this concept and makes concrete suggestions for moving from moral distress to moral action. Curl shared with me that she had a difficult time writing this commentary, and eventually realized that she was experiencing moral distress in her current position. Her personal experience makes this commentary especially valuable.

In her “Tools for Teaching” column, titled “Teaching Normal Birth, Normally,” Barbara Hotelling provides another example of the challenges childbirth educators face. Hotelling shares her personal experiences struggling to make sure her classes present evidence-based information in ways that women can understand and use to make informed decisions. Her suggestions for learning activities to try in your classes are excellent.

Deb Gauldin once again tickles our funny bone in a surprising way. In her “Deb’s Last Laugh” column, Gauldin writes about phone triage. After a good laugh, you will wonder, as I did, about the ethics of phone triage for maternity care.

Maureen Corry and Rima Jolivet wrote the guest editorial for this issue. “Doing the Right Thing for Women and Babies: Policy Initiatives to Improve Maternity Care Quality and Value” highlights the problems in the current environment where ethical principles are not honored. In its landmark report, *Crossing the Quality Chasm: A New Health System for the 21st Century*, the Institute of Medicine Committee on Quality Health Care in America (2001) called for large-scale reform of the U.S. health-care system and laid out six national aims for quality improvement, calling for care that is safe, effective, patient-centered, timely, efficient, and equitable. Childbirth Connection staff and members of its vision team adapted these six seminal aims to the field of maternity care in a vision-setting keynote paper developed for its upcoming 90th anniversary policy symposium, *Transforming Maternity Care: A High Value Proposition*. These six aims for maternity care serve as a framework for Childbirth Connection’s Maternity Quality Matters Initiative, a multi-pronged program agenda intended to foster a maternity care system that delivers care of the high-

Our authors have done a superb job discussing the ethics of birth, the challenges we face in the current maternity care environment, and the critical need to incorporate ethical principles into practice.

est quality and value in order to achieve optimal health outcomes and experiences for mothers and babies. Childbirth Connection’s work is a fine example of moving from principles to practice in the policy arena and is a great motivation for all of us who want to “do the right thing” for mothers and babies.

This issue of JPE is a rich compilation of important, challenging, and hopeful information. There is food for thought on each page. I keep going back and rereading what our authors have shared. There is so much to think about as we struggle to do the right thing in our own work. Our authors have done a superb job discussing the ethics of birth, the challenges we face in the current maternity care environment, and the critical need to incorporate ethical principles into practice.

REFERENCES

- Institute of Medicine, Committee on Quality Health Care in America. (2001). *Crossing the quality chasm: A new health system for the 21st century*. Washington, DC: National Academies Press.
- Lamaze International. (2006, June). *Code of ethics for Lamaze Certified Childbirth Educators*. Retrieved November 23, 2008, from <http://www.lamaze.org/Default.aspx?tabid=561>
- Lothian, J. (2007). The Lamaze Certified Childbirth Educator: Standards of practice. *Journal of Perinatal Education*, 16(1), 29–31.
- Morton, C. H., & Hsu, C. (2007). Contemporary dilemmas in American childbirth education: Findings from a comparative ethnographic study. *Journal of Perinatal Education*, 16(4), 25–37.
- Sakala, C., & Corry, M. P. (2008). *Evidence-based maternity care: What it is and what it can achieve*. New York: Milbank Memorial Fund. Retrieved December 1, 2008, from www.childbirthconnection.org/ebmc/

JUDITH LOTHIAN is a childbirth educator in Brooklyn, New York, a member of the Lamaze International Certification Council, and the associate editor of *The Journal of Perinatal Education*. She is also an associate professor in the College of Nursing at Seton Hall University in South Orange, New Jersey.